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DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL
HEALTH

Southern Nevada Adult Mental Health Services

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August 16, 2013

Rufus Arther, Branch Chief
Western Division for Survey and Certification
San Francisco Regional Office
Centers for Medicare and Medicaid Services
907th Street, Suite 5-300 (SW)
San Francisco, CA 94103-6707

Re: EMTALA and Complaint #NV00035394

Dear Mr. Arther:

Southern Nevada Adult Mental Health Services' (SNAMHS) goal is to meet or exceed all regulatory expectations and best standards of care in treatment and service delivery while also recognizing it is our responsibility to continuously assess and be accountable when we find areas where we can or need to improve.

The Nevada Department of Health and Human Services (NV DHHS) surveyed our hospital on May 9, 2013 based on an allegation of noncompliance with the Emergency Medical Treatment and Labor Act (EMTALA) requirements of 42 C.F.R. § § 489.20 and 489.24.

The NV DHHS survey did not identify problems with individuals being able to access our inpatient behavioral services. Providing quality mental health care to adults with mental illness is part of our mission and we will continue to work every day to provide the wide range of excellent care and services our patients need.

The NV DHHS survey cited SNAMHS for not meeting the requirements established under title XVIII of the Social Security Act (the Act) and the regulations established by the Secretary of Health and Human Services under the authority contained in section 1861 of the Act to participate in the Medicare

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program. Further, as pertinent here, the provisions of the EMTALA impose special responsibilities on a hospital with a dedicated emergency department.

The SNAMHS Hospital does not have an emergency room and is therefore not governed by EMTALA. All of SNAMHS hospital beds are licensed as inpatient beds to serve adults with acute behavioral needs and has been since 2006. Since the inception of these licensed beds, through to May 9, 2013, SNAMHS has not received any previously conducted survey's findings to indicate an EMTALA violation. SNAMHS plans to appeal these findings.

We respect the NV DHHS and their survey process, and we take these findings seriously. The NV DHSS survey did identify some areas where our inpatient hospital could improve relating to documentation and the coordination of aftercare. We want you to be aware of the actions we have taken to make improvements.

Improvements Being Made:

- A. Public information clarification to promote health literacy for individuals in acute or urgent behavioral crisis can be improved. These individuals are often stigmatized in non-psychiatric medical emergency rooms because behavioral events are not viewed with the same intensity as medical life and death events. These behavioral events are emergent to the individuals involved. We have identified areas on the internal and public information documents where the term "emergency" is used to describe the urgency of the behavioral issue, however, we acknowledge some may misunderstand the use of the word to incorrectly believe the facility has the capability to treat life threatening medical emergencies. We have clarified this term as acute and urgent behavioral needs. Doing so will enhance health literacy for the individuals we serve and assist them to access services in more access points other than the emergency rooms of local medical hospitals.
- B. The coordination of non-psychiatric medical care has been improved for individuals we serve. The individuals we serve have not had access to primary care physicians and the only non-psychiatric medical services they receive are often when they experience an acute or urgent behavioral event. We have improved the coordination of medical and behavioral care by implementing new procedures and are monitoring and auditing compliance.
- C. Individuals experiencing acute and urgent behavioral needs have the right to refuse treatment for behavioral and medical care. We have improved the education provided to these individuals and their family/guardians to promote health literacy and engagement in their treatment plan. We are auditing for compliance.
- D. Discharge and aftercare processes have been significantly enhanced. Our employees are linking the individuals we serve to support services for medical, behavioral, and social needs, making the appointments, coordinating with family/caregivers and verifying follow through, and documenting these activities in the medical record. We are auditing for compliance.

About Southern Nevada Adult Mental Health Services:

We are fortunate to have such skilled and dedicated mental health professionals including physicians, nurses, psychologists, clinical social workers, and technicians, who are working every day to provide a wide range of high-quality care and services to our patients.

In the last fiscal year, SNAMHS admitted and served approximately 600 individuals in our inpatient hospital every month.

We are always looking for ways to offer the best possible mental health care and treatment available. To achieve the best outcome for each patient, we use a range of approaches and types of treatments, based on the latest medical evidence and appropriate therapies.

SNAMHS is dedicated to continuous learning and continuous improvement. As we make changes and improve and enhance our mental health services, we will continue to actively solicit and use our patients' input and suggestions through patient satisfaction surveys and other communications with patients, family members, employees, and physicians.

Please find enclosed the SNAMHS required response and plan of correction.

Thank you for your understanding and support as we work together with our professional staff, patients, and with NV DHHS, to continue to improve and enhance our mental health services.

Sincerely,

A handwritten signature in blue ink that reads "Chelsea Szklany". The signature is written in a cursive, flowing style.

Chelsea Szklany, OTR/L
SNAMHS Administrator

CC: Steve Gerleman, Health Facilities Inspector III,
Las Vegas Office, Bureau of Health Care Quality and Compliance